ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
ÿ.		·	
FEE DETERMINATION	135		09-04-0
O.I.P.E. CLASSIFIER		10	9-1/2-01
FORMALITY REVIEW	Ca	1122	10-02-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

Rejected N Non-elected
Allowed I Interference
(Through numeral)... Canceled A Appeal
Restricted Q Objected

Best Available Copy

1	ricstricted	
Ctairn 3 8 Date	Claim O Date	Claim Date
inat Mginal	Pinal Original	Final Original
O LLV	51 0 52	101
2 1.1.1	52	102
3 4 4 1		104
4000	54 1/	105
5 1		106
7 2 7	56 17	107
-	58	108
8 0 0 0	59	109
10 0 0 0 0	60	110
Hiid 22	61	111
12 0 0 0	62	112
13 0 0 0	63	113
14 1/ 1/	64	114
15 1	65	115
16	66	116
	67	117
(18)	68	118
19	69	119
20	70	120
21	71	121
22	72	122
23	73	123
24	74	124
25	75	125
26	76	126
27	77	127
28	78	128
29	79	130
30	80	131
31	81	132
32 33	83	133
34	84	134
35	85	135
A36	86	136
37	87	137
<i>(</i> 38	88	138
39	89	139
40	90	140
(41)	91	141
	92	142
43	93	143
44	94	144
45	95	145
46	96	146
47	97	147
48	98	148
49	99	149
50	100	150

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)